



AUG 31 2006

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Approved for use through 08/30/03. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|------------------------------------------|----|------------------------|--------------------|
| | | Application Number | 09/966,421 |
| | | Filing Date | September 27, 2001 |
| | | First Named Inventor | Syed F.A. Hossainy |
| | | Group Art Unit | 3734 |
| | | Examiner Name | Vi X. Nguyen |
| Total Number of Pages in This Submission | 23 | Attorney Docket Number | 50623.60 |

ENCLOSURES (check all that apply)

| | | |
|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Postage Paid Return Postcard | <input type="checkbox"/> Drawing(s) In/Formal ____ Sheets with Submission of Drawings Transmittal | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Response To Office Action (18 pages) | <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Amendment Transmittal Letter | <input checked="" type="checkbox"/> Request for Continued Examination Transmittal (RCE) (in duplicate) (2 pages) | <input type="checkbox"/> Statement of Common Ownership (1 page) |
| <input type="checkbox"/> Statement of Common Ownership | <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) (2 pages) | <input type="checkbox"/> Request for Status of Application |
| <input type="checkbox"/> Petition for Extension of Time (months) (page) (in duplicate) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 citing ____ References | <input type="checkbox"/> Terminal Disclaimer | |
| <input checked="" type="checkbox"/> Express Mail Label No. EV 721 156 020 US | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

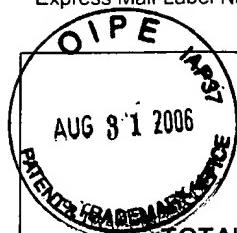
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|--------------------------------------------------------------------------|
| Firm or Individual name | Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigan, Reg. No. 44,826 |
| Signature | |
| Date | August 31, 2006 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: August 31, 2006

| | | | |
|-----------------------|---------------|------|-----------------|
| Typed or printed name | Yayoi Barrack | | |
| Signature | | Date | August 31, 2006 |



FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

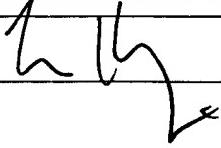
Subtotal (1) + Subtotal (2) + Subtotal (3) =

(\$1,240.00)

| Complete if Known | |
|------------------------|--------------------|
| Application Number | 09/966,421 |
| Filing Date | September 27, 2001 |
| First Named Inventor | Syed F.A. Hossainy |
| Group Art Unit | 3731 |
| Examiner Name | Vi X. Nguyen |
| Attorney Docket Number | 50623.60 |

| METHOD OF PAYMENT | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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--|--|--------------|--------------|--------------------------------------------------------|--|------------|------------|------------------|--|--------------|------------|----------------------------------------------------------|--|--------------|------------|--------------------------------|--|------------|------------|------------------|--|-----------|-----------|-------------------------------|--|----------|----------|-----------------------------------------------|--|------------|------------|------------------------------------------------|--|----------|----------|----------------------------------------------------------------------------|--|------------|------------|-------------------------------------------------------------|--|------------|------------|-----------------------------------------|-----|--|--|----------------------|--|--|--|----------------------|--|--|--|--------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------|---------------------------|-----------------|-----------|-----------|------------------------|------------|------------|-----------------------------------|------------|------------|--------------------------|--|--|-------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------|--|----------|--|----------|--|-----|------------------------|---------------------------------|---------|-----|---------|-------|----|----------|-----|--------|-------|-------|---|--------|-----|---------|-----|----------------------------------------------------|--|--|--|--|--|--------------------------|--|--|--|--|--|
| <p>1. The Commissioner is hereby authorized to:</p> <p><input checked="" type="checkbox"/> Charge the indicated fees to the below mentioned deposit account.</p> <p><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.[†]</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> | | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code/Fee</th> <th>Small Entity Fee Code/Fee</th> <th>Fee Description</th> <th>Fee Due</th> </tr> </thead> <tbody> <tr><td>1051/\$130</td><td>2051/\$65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052/\$50</td><td>2052/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1251/\$120</td><td>2251/\$60</td><td>Extension for response within first month[†]</td><td></td></tr> <tr><td>116/\$450</td><td>2252/\$225</td><td>Extension for response within second month[†]</td><td></td></tr> <tr><td>1253/\$1,020</td><td>2253/\$510</td><td>Extension for response within third month[†]</td><td></td></tr> <tr><td>1254/\$1,590</td><td>2254/\$795</td><td>Extension for response within fourth month[†]</td><td></td></tr> <tr><td>1255/\$2,160</td><td>2255/\$1,080</td><td>Extension for response within fifth month[†]</td><td></td></tr> <tr><td>1401/\$500</td><td>2401/\$250</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1453/\$1,500</td><td>2453/\$750</td><td>Petition to revive unintentionally abandoned Application</td><td></td></tr> <tr><td>1501/\$1,400</td><td>2501/\$700</td><td>Utility Issue Fee (Or Reissue)</td><td></td></tr> <tr><td>1502/\$800</td><td>2502/\$400</td><td>Design Issue Fee</td><td></td></tr> <tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123/\$50</td><td>123/\$50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>1806/\$180</td><td>1806/\$180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809/\$790</td><td>2809/\$395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1801/\$790</td><td>2801/\$395</td><td>Request for Continued Examination (RCE)</td><td>790</td></tr> <tr> <td colspan="2"></td> <td>Other fee (specify):</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>Other fee (specify):</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>SUBTOTAL (3)</td> <td>(\$) 790</td> </tr> <tr> <td colspan="2"> <p>2. CLAIMS</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code/Fee</th> <th>Small Entity Fee Code/Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202/\$50</td><td>2202/\$25</td><td>Claims in excess of 20</td></tr> <tr><td>1201/\$200</td><td>2201/\$100</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203/\$360</td><td>2203/\$180</td><td>Multiple dependent claim</td></tr> </tbody> </table> </td> <td colspan="2"></td> </tr> <tr> <td colspan="2"> <p>110/\$18 210/\$9 Reissue claims in excess of 20 and over original Patent</p> </td> <td colspan="2"> <table border="1"> <thead> <tr> <th colspan="2">(Col. 1)</th> <th colspan="2">(Col. 2)</th> <th colspan="2">(Col. 3)</th> </tr> <tr> <th>For</th> <th>No. of Existing Claims</th> <th>Highest No. Previously Paid For</th> <th>Extra**</th> <th>Fee</th> <th>Fee Due</th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td>54</td> <td>20 or 45</td> <td>= 9</td> <td>x \$50</td> <td>\$450</td> </tr> <tr> <td>INDEP</td> <td>7</td> <td>3 or 7</td> <td>= 0</td> <td>x \$200</td> <td>\$0</td> </tr> <tr> <td colspan="6">[] First presentation of multiple dependent claim</td> </tr> </tbody> </table> </td> </tr> <tr> <td colspan="6" style="text-align: right;">SUBTOTAL (2) (\$) 450</td> </tr> </tbody> </table> | | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due | 1051/\$130 | 2051/\$65 | Surcharge - late filing fee or oath | | 1052/\$50 | 2052/\$25 | Surcharge-late provisional filing fee or cover sheet | | 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | | 1251/\$120 | 2251/\$60 | Extension for response within first month [†] | | 116/\$450 | 2252/\$225 | Extension for response within second month [†] | | 1253/\$1,020 | 2253/\$510 | Extension for response within third month [†] | | 1254/\$1,590 | 2254/\$795 | Extension for response within fourth month [†] | | 1255/\$2,160 | 2255/\$1,080 | Extension for response within fifth month [†] | | 1401/\$500 | 2401/\$250 | Notice of Appeal | | 1453/\$1,500 | 2453/\$750 | Petition to revive unintentionally abandoned Application | | 1501/\$1,400 | 2501/\$700 | Utility Issue Fee (Or Reissue) | | 1502/\$800 | 2502/\$400 | Design Issue Fee | | 122/\$130 | 122/\$130 | Petitions to the Commissioner | | 123/\$50 | 123/\$50 | Petitions related to provisional applications | | 1806/\$180 | 1806/\$180 | Submission of Information Disclosure Statement | | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | | 1809/\$790 | 2809/\$395 | Filing a submission after final rejection (37 CFR 1.129(a)) | | 1801/\$790 | 2801/\$395 | Request for Continued Examination (RCE) | 790 | | | Other fee (specify): | | | | Other fee (specify): | | | | SUBTOTAL (3) | (\$) 790 | <p>2. 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| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1052/\$50 | 2052/\$25 | Surcharge-late provisional filing fee or cover sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1251/\$120 | 2251/\$60 | Extension for response within first month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 116/\$450 | 2252/\$225 | Extension for response within second month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1253/\$1,020 | 2253/\$510 | Extension for response within third month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1254/\$1,590 | 2254/\$795 | Extension for response within fourth month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1255/\$2,160 | 2255/\$1,080 | Extension for response within fifth month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1401/\$500 | 2401/\$250 | Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1453/\$1,500 | 2453/\$750 | Petition to revive unintentionally abandoned Application | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1501/\$1,400 | 2501/\$700 | Utility Issue Fee (Or Reissue) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1502/\$800 | 2502/\$400 | Design Issue Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 122/\$130 | 122/\$130 | Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 123/\$50 | 123/\$50 | Petitions related to provisional applications | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1806/\$180 | 1806/\$180 | Submission of Information Disclosure Statement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1809/\$790 | 2809/\$395 | Filing a submission after final rejection (37 CFR 1.129(a)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1801/\$790 | 2801/\$395 | Request for Continued Examination (RCE) | 790 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Other fee (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Other fee (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | SUBTOTAL (3) | (\$) 790 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>2. CLAIMS</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code/Fee</th> <th>Small Entity Fee Code/Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202/\$50</td><td>2202/\$25</td><td>Claims in excess of 20</td></tr> <tr><td>1201/\$200</td><td>2201/\$100</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203/\$360</td><td>2203/\$180</td><td>Multiple dependent claim</td></tr> </tbody> </table> | | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | 1202/\$50 | 2202/\$25 | Claims in excess of 20 | 1201/\$200 | 2201/\$100 | Independent claims in excess of 3 | 1203/\$360 | 2203/\$180 | Multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1202/\$50 | 2202/\$25 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1201/\$200 | 2201/\$100 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1203/\$360 | 2203/\$180 | Multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>110/\$18 210/\$9 Reissue claims in excess of 20 and over original Patent</p> | | <table border="1"> <thead> <tr> <th colspan="2">(Col. 1)</th> <th colspan="2">(Col. 2)</th> <th colspan="2">(Col. 3)</th> </tr> <tr> <th>For</th> <th>No. of Existing Claims</th> <th>Highest No. Previously Paid For</th> <th>Extra**</th> <th>Fee</th> <th>Fee Due</th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td>54</td> <td>20 or 45</td> <td>= 9</td> <td>x \$50</td> <td>\$450</td> </tr> <tr> <td>INDEP</td> <td>7</td> <td>3 or 7</td> <td>= 0</td> <td>x \$200</td> <td>\$0</td> </tr> <tr> <td colspan="6">[] First presentation of multiple dependent claim</td> </tr> </tbody> </table> | | (Col. 1) | | (Col. 2) | | (Col. 3) | | For | No. of Existing Claims | Highest No. Previously Paid For | Extra** | Fee | Fee Due | TOTAL | 54 | 20 or 45 | = 9 | x \$50 | \$450 | INDEP | 7 | 3 or 7 | = 0 | x \$200 | \$0 | [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Col. 1) | | (Col. 2) | | (Col. 3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For | No. of Existing Claims | Highest No. Previously Paid For | Extra** | Fee | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | 54 | 20 or 45 | = 9 | x \$50 | \$450 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INDEP | 7 | 3 or 7 | = 0 | x \$200 | \$0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) (\$) 450 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

^{*} Subtract the greater number of Col. 2^{**} If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

| SUBMITTED BY | | Complete (if applicable) | |
|-----------------------|-------------------------------------------------------------------------------------|--------------------------|-----------------|
| Typed or Printed Name | Cameron K. Kerrigan | Reg. Number | 44,826 |
| Signature |  | Date | August 31, 2006 |